

LOUISE S. GLASSO, CMC  
City Clerk



ANTHONY DARCANGELO  
Deputy City Clerk

**OFFICE OF THE CITY CLERK**  
ROME CITY HALL, 198 N. WASHINGTON STREET  
ROME, NEW YORK 13440-5815  
Telephone: (315) 339-7659 Fax: (315) 838-1160  
www.romenewyork.com

**Application for Coin Operated Amusement Device License**

**Date:** \_\_\_\_\_

1. Name of Applicant: \_\_\_\_\_

2. Address of Applicant: \_\_\_\_\_

3. Is this an original or renewal application? \_\_\_\_\_

4. Address and type of business \_\_\_\_\_

5. Is this location within 500 feet of a public or private school? \_\_\_\_\_

6. Type and name of device \_\_\_\_\_

Manufacturer's serial number \_\_\_\_\_

7. Name and address of manufacturer \_\_\_\_\_

7-A. Do you (Applicant) own the Device? \_\_\_\_\_. If no, answer #8.

8. Name and address of owner(s). \_\_\_\_\_

9. Can this device be used or operated for gambling purposes? \_\_\_\_\_

10. Have you ever been convicted of a crime? \_\_\_\_\_

(if yes explain) \_\_\_\_\_

11. Are you an employee of the City of Rome? \_\_\_\_\_(if yes, explain)

12. I, THE UNDERSIGNED, do hereby affirm that all of the above answers are correct and that I am the owner or operator of the amusement device covered by this application.

\_\_\_\_\_  
Signature

Sworn to before me this \_\_\_\_\_ Day of \_\_\_\_\_, 201\_\_\_\_\_

\_\_\_\_\_  
Notary Public, Oneida County/Commissioner of Deeds

### **POLICE DEPARTMENT VERIFICATION**

The references and credentials of the individual have been checked and  
APPROVED/DISAPPROVED by the Rome Police Department

Dated: \_\_\_\_\_

\_\_\_\_\_  
Printed Name & Title

### **CITY CLERK LICENSE INFORMATION**

Licensing Fee: 1 -6 machines \$ 150.00  
7 or more machines \$250.00  
Late Fee: \$50.00

Paid: \$ \_\_\_\_\_

Date License Issued: \_\_\_\_\_

License Number \_\_\_\_\_

Date License Expires: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
City Clerk Signature

